

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>BA</i>	70385	10-8-00
O.I.P.E. CLASSIFIER			9/13/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>DS</i>	70014	9/13/00

INDEX OF CLAIMS

+ 1 = ✓
 - 1 = ✗
 (Through numeral)
 Allowed
 Canceled
 Restricted
 Rejected
 N
 I
 A
 O
 Non-elected
 Inference
 Appeal
 Objected

Claim	Final	Date	Claim	Final	Date	Claim	Final	Date
50	Original		100	Original		150	Original	
49			99			149		
48			98			148		
47			97			147		
46			96			146		
45			95			145		
44			94			144		
43			93			143		
42			92			142		
41			91			141		
40			90			140		
39			89			139		
38			88			138		
37			87			137		
36			86			136		
35			85			135		
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33			83			133		
32			82			132		
31			81			131		
30			80			130		
29			79			129		
28			78			128		
27			77			127		
26			76			126		
25			75			125		
24			74			124		
23			73			123		
22			72			122		
21			71			121		
20			70			120		
19			69			119		
18			68			118		
17			67			117		
16			66			116		
15			65			115		
14			64			114		
13			63			113		
12			62			112		
11			61			111		
10			60			110		
9			59			109		
8			58			108		
7			57			107		
6			56			106		
5			55			105		
4			54			104		
3			53			103		
2			52			102		
1			51			101		

If more than 150 claims or 10 actions
 staple additional sheet here
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